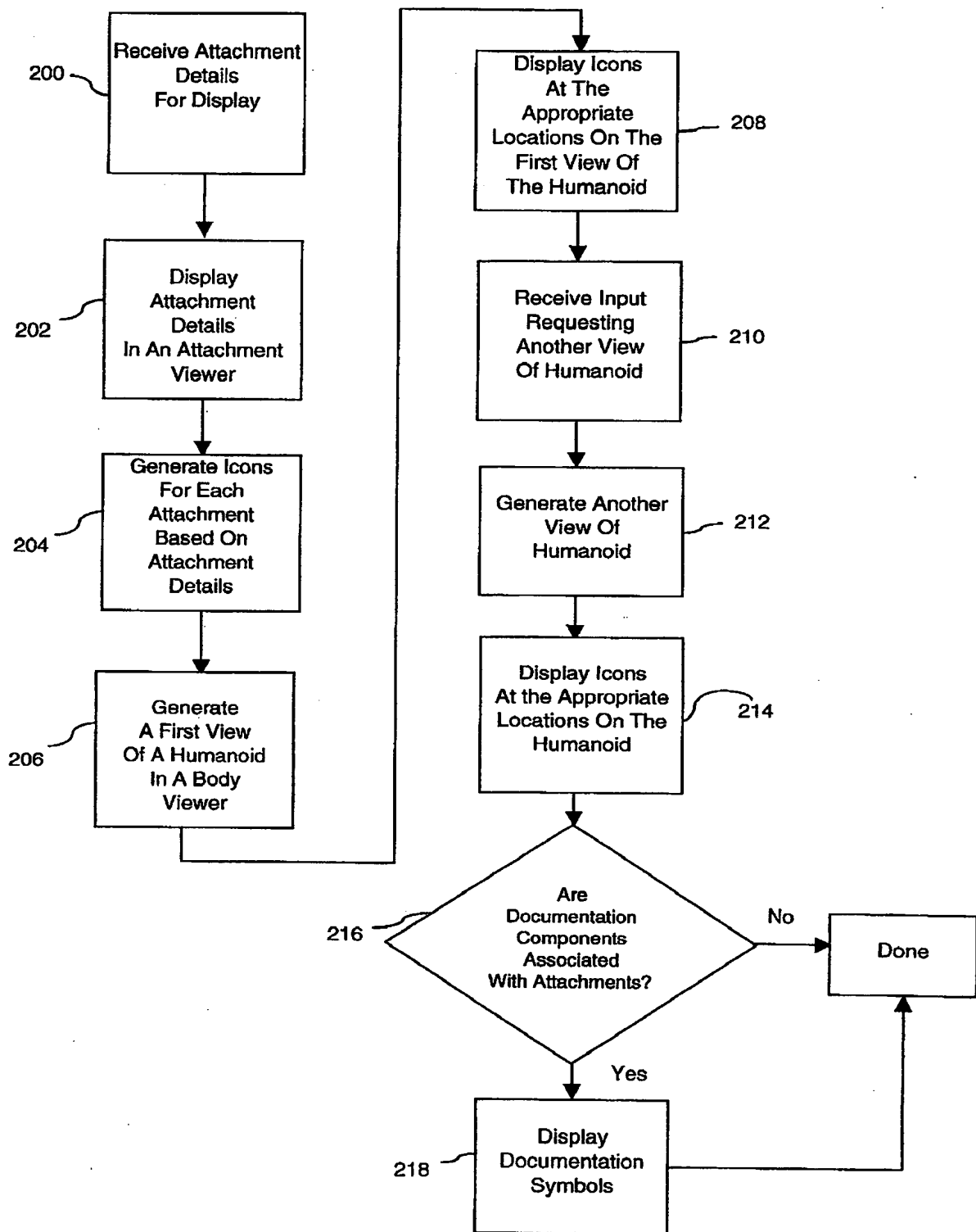


FIG. 1.

FIG. 2.



1/11/2003 8:00:00 AM - 1/11/2003 11:00:00 AM

Attachments

330

332

326

328

324

Legend

Intake

Output

Monitoring

Culture Info

Notes

Task

Type	Location	Date	Order	Order Details
Peripheral venous	R Hand	1/6	Dextrose 5% + 20 meq KCL	1000 ml, 100 ml/hr Intuse over 8 hours, IV
Peripheral venous hep lock	L Forearm	1/8	Ancel	1 gm, IVPB, q8hrs, 11/26/02
Ductube			Jevity	100ml/hr
Central venous - triple lumen	L Subclavian	1/5	Triple lumen catheter	
Foley Catheter	Urethra	1/6	Foley Catheter	to DD
Chest Tube	RL	1/2	Chest Tube	-30 mH2O
Chest Tube			Chest Tube	-30 mH2O
Nephrostomy	R	1/1	Nephrostomy	to DD
Ventilator	Trachea	1/5	Ventilator	FI02 30%, PIP 20, Rate 12
Balloon Pump	L Fem	1/3	Balloon Pump	21

FIG. 3A.

306

336 314

304

308

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300

312

344

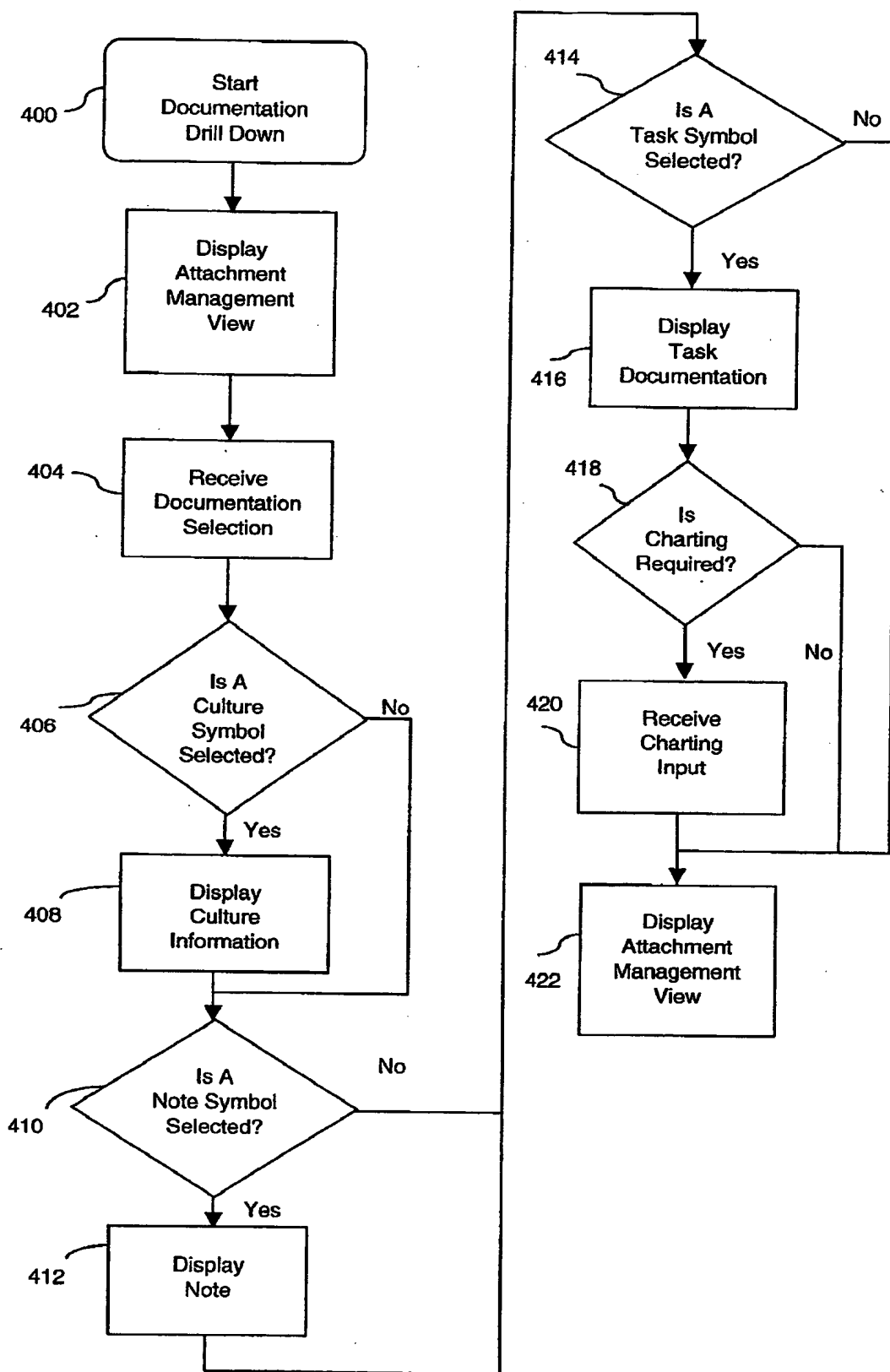
320

316

302

346

FIG. 4.



FlowChart Fig 4

FIG. 5.

500

1/11/2003 8:00:00 AM - 1/11/2003 11:00:00 AM

Attachments

Type	Location	Date	Order	Order Details
Peripheral venous	R Hand	1/8	Dextrose 5% + 20 meq KCL	1000 ml, 100 ml/hr Infuse over 8 hours, IV
Peripheral venous hep lock	L Forearm	1/8	Ancef	1 gm, IVPB, q8hrs, 11/26/02
Duct tube			Jevity	100ml/hr
Central venous - triple lumen	L Subclavian	1/5	Triple lumen catheter	
Proximal			Dextrose 5% + 80 meq Dopamine	500ml, Titrate to keep DBP > 60, IV
Distal			Lactated Ringers	1000ml, 45 ml/hr, Infuse over 22 hrs, IV
Middle			TPN	1000ml, 40 ml/hr, Infuse over 24 hrs, IV
Foley Catheter	Urethra	1/8	Foley Catheter	to DD
Chest Tube	ALL	1/2	Chest Tube	-30 mmH2O
Chest Tube			Chest Tube	-30 mmH2O
Nephrostomy	R	1/1	Nephrostomy	to DD
Ventilator	Trachea	1/5	Ventilator	FIO2 30%, PIP 20, Rate 12
Balloon Pump	L Fem	1/3	Balloon Pump	21

Legend

504

502

FIG. 6.

Microbiology Result Details - Micro, Noah C. - MRN000-002-74

Time Editing Application: H00R0200137Z01H0X

Time Report	Susceptibility	Specimens	Technique	Action Log
Amended Final Report - Friday, December 28, 2001 11:17 AM - >100,000 cfu/ml Staphylococcus species[1] Gram Positive Cocci (1) Staphylococcus species was previously reported incorrectly as Gram Negative Rod. Change to correct organism name was made in Preliminary Report issued on 27/12/01. Incorrect reporting due to: biochemical mislabeling.				
Amended Final Report - Friday, December 28, 2001 11:16 AM - >100,000 cfu/ml Staphylococcus species[1] (1) Staphylococcus species was previously reported incorrectly as Gram Negative Rod. Change to correct organism name was made in Preliminary Report issued				

FIG. 7.

Sticky Note	
Nolan, Eric 123456789	402 A Cardiology
12/4/2002 11:28 AM	
Rogers, Randy Inserted in OR 12/2/02	

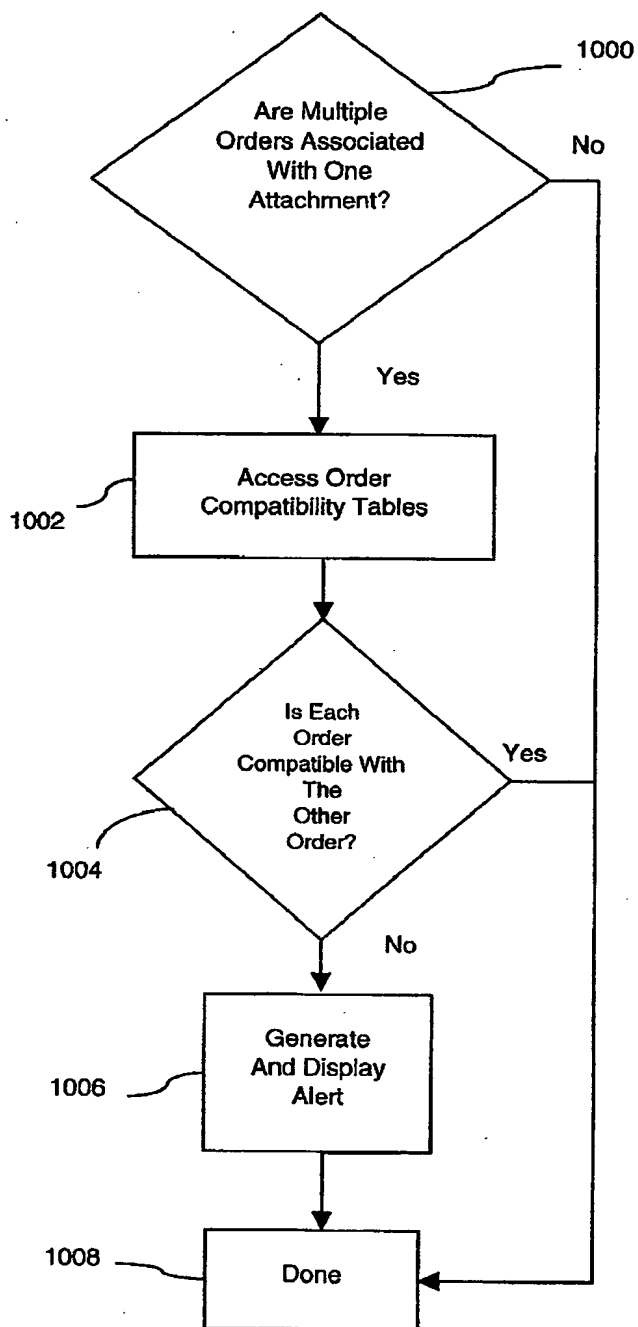
FIG. 8.

Tasks		929 B	
Harper, Leonard L.		Internal Medicine	
000000920			
1/21/2003 4:00:00		01/21/03 16:00:00	
Check Residual Volume		Pending	

FIG. 9.

Naso-Drogastric Tube Care - Harper, Leonard L.		By: Douglas, Peggy	
* Performed on: 1/11/2003		1013	
Naso/Drogastric			
Nasogastric/Drogastric Tube Care			
Tube Activity <input type="radio"/> Discontinue <input type="radio"/> Insert <input type="radio"/> Irrigated with other <input type="radio"/> Irrigated with water <input type="radio"/> Repositioned <input type="radio"/> Sample <input type="radio"/> Secure <input type="radio"/> Other:	Tube Location <input type="radio"/> Nostil, Left <input type="radio"/> Nostil, Right <input type="radio"/> Oral	Tube Size <input type="radio"/> 5 French <input type="radio"/> 6 French <input type="radio"/> 8 French <input type="radio"/> 10 French <input type="radio"/> 12 French <input type="radio"/> 14 French <input type="radio"/> 16 French <input type="radio"/> 18 French <input type="radio"/> Other:	
Tube Type <input type="radio"/> Nasoduodenal <input type="radio"/> Nasogastric tube <input type="radio"/> Drogastric <input type="radio"/> Other:	Irrigation Method <input type="radio"/> Clamped <input type="radio"/> Continuous suction <input type="radio"/> Gravity <input type="radio"/> Low intermittent suction <input type="radio"/> Other:	Irrigation Description <input type="checkbox"/> Bile <input type="checkbox"/> Blood-tinged <input type="checkbox"/> Bloody <input type="checkbox"/> Clear <input type="checkbox"/> Coffee ground <input type="checkbox"/> Fecal odor <input type="checkbox"/> Mucous <input type="checkbox"/> Pink <input type="checkbox"/> Red <input type="checkbox"/> Undigested food <input type="checkbox"/> Watery <input type="checkbox"/> Other:	
Initial Gastric Tube Output mL	Gastric Output Blood <input type="radio"/> Negative <input type="radio"/> Positive	Blackment Confirmed By <input type="checkbox"/> Aspiration <input type="checkbox"/> Auscultation <input type="checkbox"/> pH testing <input type="checkbox"/> X-ray <input type="checkbox"/> Other:	Amount of Irrigant
Procedure Tolerance <input type="radio"/> Good <input type="radio"/> Fair <input type="radio"/> Poor	Procedure Response	Unexpected Response	

FIG. 10.



FlowChart Fig 10